

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE: **MIGUEL ANGEL MARZAN BONILLA**
MAYRA BELEN DIAZ LAUREANO

VILLA RICA, CALLE EVANS AN 31, BAYAMON, 00959

DEBTOR(S) SSN: **XXX-XX-9563** SSN: **XXX-XX-4839**

BK. CASE # **10-06173**

ESL

CHAPTER 13

CHAPTER 13 PAYMENT PLAN

NOTICE: * The following plan contains provisions which may significantly affect your rights. You should read this document carefully and discuss it with your attorney. When confirmed, the plan will bind the debtor and each creditor to its terms. Objections must be filed in writing with the Court and served upon the debtor(s), debtors' counsel, the Trustee and any other entity designated by the Court, at the 341 meeting of creditors or not less than twenty (20) days prior to the scheduled confirmation hearing. For post confirmation Plan Modifications, objections must be filed and notified in the same manner within twenty (20) days from its notification. * See the notice of commencement of case for 341 meeting date and claims bar date, the latter is the date by which a proof of claim must be filed in order to participate of the plan distribution.

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee:
 directly by payroll deductions, as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.
3. The Confirmation Order will not vest property of the Estate on Debtor(s) until the Order discharging Debtor(s) is entered.

PLAN DATED:

PRE POST-CONFIRMATION

AMENDED PLAN DATED:

FILED BY DEBTOR TRUSTEE UNSECURED CREDITOR

I. PAYMENT PLAN SCHEDULE

\$ 900.00 x 60 = \$ 54,000.00
\$ _____ x _____ = \$ _____
TOTAL = 60 \$ 54,000.00

Additional Payments: \$ 195,600.00 to be paid as a LUMP SUM within _____ with proceeds to come from

Sale of property identified as follows:

SALE OF GAS STATION LOCATED IN
SANTA JUANITA

Other: _____

Periodic Payments to be made other than and in addition to the above.

\$ _____ x _____ = \$ _____

To be made on: _____

PROPOSED PLAN BASE: \$ 249,600.00

II. ATTORNEY'S FEES

To be treated as a § 507 Priority, and paid before any other creditor and concurrently with the Trustee's fees, unless otherwise provided:

a. Rule 2016(b) Statement: \$ 3,000.00
b. Fees Paid (Pre-Petition): (\$ 1,000.00)
c. R 2016 Outstanding balance: \$ 2,000.00

d. Post Petition Additional Fees: \$ _____
e. Total Compensation: \$ 3,000.00

Signed: /s/ MIGUEL ANGEL MARZAN BONILLA
DEBTOR
/s/ MAYRA BELEN DIAZ LAUREANO
JOINT DEBTOR
/s/ JUAN O. CALDERON LITHGOW
BY: ATTORNEY

II. DISBURSEMENT MADE IN THE FOLLOWING ORDER AND AFTER ADMINISTRATIVE EXPENSES

A. SECURED CLAIMS: Debtor represents that there are no secured claims.
 Secured creditors will retain their liens and shall be paid as follows:

1. **ADEQUATE PROTECTION** Payments: Cr. _____ \$ _____

2. **Trustee will pay secured ARREARS:**

Cr. WESTERNBANK	Cr. SANTANDER	Cr. FIRSTBANK
Acct. XXX-XX-9563	Acct. 8570009831126	Acct. 4160000168421
\$ 10,000.00	\$ 2,000.00	\$ 3,000.00

3. **Trustee will pay REGULAR MONTHLY PAYMENTS:**

Cr. _____	Cr. _____	Cr. _____
Acct. _____	Acct. _____	Acct. _____
Monthly Pymt. \$ _____	Monthly Pymt. \$ _____	Monthly Pymt. \$ _____

4. **Trustee will pay IN FULL Secured Claims:**

Cr. _____	Cr. _____	Cr. _____
\$ _____	\$ _____	\$ _____

5. **Trustee will pay VALUE OF COLLATERAL:**

Cr. _____	Cr. _____	Cr. _____
\$ _____	\$ _____	\$ _____

6. **Secured Creditor's interest will be insured. INSURANCE POLICY will be paid through plan:**

Cr. _____	Ins. Co. _____	Premium: \$ _____
(Please indicate in "Other Provisions" the insurance coverage period)		

7. **Debtor SURRENDERS COLLATERAL TO Lien Holder:** _____

8. **Debtor will maintain REGULAR PAYMENTS DIRECTLY to:**
SANTANDER, FIRSTBANK BBVA, BANCO DESARROLLO

B. PRIORITIES. The Trustee will pay §507 priorities in accordance with the law [§1322 (a)(2)].

IRS, DEPT HACIENDA, CRIM

C. UNSECURED PREFERRED: Plan Classifies Does not Classify Claims.

<input type="checkbox"/> Class A-	<input type="checkbox"/> Co-debtor Claims: <input type="checkbox"/> Pay 100% / <input type="checkbox"/> "Pay Ahead".
<input type="checkbox"/> Class B-	<input type="checkbox"/> Other Class: _____
<input type="checkbox"/> Cr. _____	<input type="checkbox"/> Cr. _____
\$ _____	\$ _____

D. GENERAL UNSECURED NOT PREFERRED: (Case Liquidation Value = \$ 300,000.00)

Will be paid 100% plus 6 % Legal Interest Will be paid Pro-Rata from any remaining funds

OTHER PROVISIONS: